



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200  
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**SK145-0114-22**  
**Job Sheet 184624**



Part No: SK145-0114-22

Job Qty: 18 ea

Part Name: Bushing



Part Weight: 0 lbs

Status: New

Priority: Medium

Job Created: 10/15/18

Job Tracking No:

Due Date: 10/19/18

Created By: Marie Lajeunesse

Type: SOLD

Description:

Note: IPP REV:A 17.06.06 NEW ISSUE DD VERF:JFS

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation          | Qty    | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |           | Sign-off              |
|-------|--------------------|--------|------------|----------|-----------|---------|-----------------------|-----------|-----------------------|
|       |                    |        |            |          | Setup Hrs | Run Hrs | Workcenter / Supplier | Lead Time |                       |
| 90    | Start up Operation | 18 Ea  | 10/19/18   | 10/19/18 | 0.00      | 0.00    | Start Up Machining-3  |           | ✓ JSD 18/12/18        |
| 100   | Hardinge           | 18 pcs | 10/19/18   | 10/19/18 | 0.00      | 9.08    | Hardinge              |           | " "                   |
| 110   | QC                 | 18 pcs | 10/19/18   | 10/19/18 | 0.00      | 0.00    | QC2 Machining-4       |           | " "                   |
| 120   | QC                 | 18 pcs | 10/19/18   | 10/19/18 | 0.00      | 0.00    | QC8 Machining-4       |           | " "                   |
| 130   | Packaging          | 18 pcs | 10/19/18   | 10/19/18 | 0.00      | 0.00    | Packaging3-1          |           | K+ 2018-12-07<br>MRO. |
| 140   | QC21-SA            | 18 Ea  | 10/19/18   | 10/19/18 | 0.00      | 0.00    | QC21                  |           | DAS                   |

Part Op Descriptions: 100 - -Machine as per folio F \*\*\*CUT BUSHING AT 0.775"\*\*\* -Deburr

21  
9-89

DEC 05 2018

### Job BOM

| Part / Item  | Component Name      | Quantity             | Operation             | Container |
|--------------|---------------------|----------------------|-----------------------|-----------|
| M17-4-R0.750 | 17-4 Round Bar .750 | 1.1988 ft (.0666 ea) | 90-Start up Operation | 5072723   |

### Job Allocations

| Operation             | Component Part | Required | Inventory | Allocated |
|-----------------------|----------------|----------|-----------|-----------|
| 90-Start up Operation | M17-4-R0.750   | 1        | 24        | 0         |

### Part Specifications

Specifications could not be found.



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                              |                                      |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------|--|------------------------------------|-------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Cross tube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                                              |                                      |  | Skid-tube <input type="checkbox"/> | Cross tube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
|                                                              | Skid-tube <input type="checkbox"/>                                                                                                                                                 | Cross tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                              | Machining <input type="checkbox"/>                                                                                                                                                 | Small Fab <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                              | Thermoforming <input type="checkbox"/>                                                                                                                                             | Finishing <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                              |                                      |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

|        |         |                 |                       |
|--------|---------|-----------------|-----------------------|
| Date : | Step #: | QTY Effective : | MRB (QSI042) Approval |
|--------|---------|-----------------|-----------------------|

|                                  |             |                                              |
|----------------------------------|-------------|----------------------------------------------|
| Description Work Order Deviation | Disposition | Completed By                                 |
|                                  |             | Lead hand / Supervisor Approval Verification |
|                                  |             |                                              |
|                                  |             | QC / QA Coordinator Approval                 |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| <b>Root Cause</b><br><table> <tr><td>Environment</td><td><input type="checkbox"/></td><td>No Re-verification</td><td><input type="checkbox"/></td></tr> <tr><td>Design</td><td><input type="checkbox"/></td><td>Operator</td><td><input type="checkbox"/></td></tr> <tr><td>Doc/Data</td><td><input type="checkbox"/></td><td>Offset/Setup</td><td><input type="checkbox"/></td></tr> <tr><td>Equip/Tooling</td><td><input type="checkbox"/></td><td>Supplier</td><td><input type="checkbox"/></td></tr> <tr><td>Handling/Pre</td><td><input type="checkbox"/></td><td>Training</td><td><input type="checkbox"/></td></tr> <tr><td>Material</td><td><input type="checkbox"/></td><td>Use for Testing</td><td><input type="checkbox"/></td></tr> <tr><td>Internal Transport</td><td><input type="checkbox"/></td><td>Poor Information</td><td><input type="checkbox"/></td></tr> <tr><td>Tribal Knowledge</td><td><input type="checkbox"/></td><td>Rushing</td><td><input type="checkbox"/></td></tr> <tr><td>LOA</td><td><input type="checkbox"/></td><td>Product Improvement</td><td><input type="checkbox"/></td></tr> <tr><td>Substation</td><td><input type="checkbox"/></td><td>Process Improvement</td><td><input type="checkbox"/></td></tr> <tr><td>Past Expiry Date</td><td><input type="checkbox"/></td><td>Manufacturing Process</td><td><input type="checkbox"/></td></tr> <tr><td>Misidentified</td><td><input type="checkbox"/></td><td>Past Due</td><td><input type="checkbox"/></td></tr> </table> |                          | Environment                       | <input type="checkbox"/> | No Re-verification    | <input type="checkbox"/> | Design               | <input type="checkbox"/> | Operator | <input type="checkbox"/> | Doc/Data | <input type="checkbox"/> | Offset/Setup | <input type="checkbox"/> | Equip/Tooling | <input type="checkbox"/> | Supplier | <input type="checkbox"/> | Handling/Pre | <input type="checkbox"/> | Training | <input type="checkbox"/> | Material | <input type="checkbox"/> | Use for Testing | <input type="checkbox"/> | Internal Transport | <input type="checkbox"/> | Poor Information | <input type="checkbox"/> | Tribal Knowledge | <input type="checkbox"/> | Rushing | <input type="checkbox"/> | LOA | <input type="checkbox"/> | Product Improvement | <input type="checkbox"/> | Substation | <input type="checkbox"/> | Process Improvement | <input type="checkbox"/> | Past Expiry Date | <input type="checkbox"/> | Manufacturing Process | <input type="checkbox"/> | Misidentified | <input type="checkbox"/> | Past Due | <input type="checkbox"/> | <b>FAULT CATEGORY</b><br><table> <tr><td>Pressure/Forced</td><td><input type="checkbox"/></td><td>Temperature/Cure</td><td><input type="checkbox"/></td><td>Power Loss/Surge</td><td><input type="checkbox"/></td><td>Positioned Wrong</td><td><input type="checkbox"/></td></tr> <tr><td>Bending</td><td><input type="checkbox"/></td><td>Set-up</td><td><input type="checkbox"/></td><td>Folio/Program</td><td><input type="checkbox"/></td><td>Outside Dimensions</td><td><input type="checkbox"/></td></tr> <tr><td>Centre Not Concentric</td><td><input type="checkbox"/></td><td>BOM/Route</td><td><input type="checkbox"/></td><td>Grain</td><td><input type="checkbox"/></td><td>Over/Under tolerance</td><td><input type="checkbox"/></td></tr> <tr><td>Cracks</td><td><input type="checkbox"/></td><td>Broken/Damage/Defect</td><td><input type="checkbox"/></td><td>Weld</td><td><input type="checkbox"/></td><td>Part Incorrect</td><td><input type="checkbox"/></td></tr> <tr><td>Crimp/Kink/Ripple/Wave</td><td><input type="checkbox"/></td><td>Inspection Incomplete/Unqualified</td><td><input type="checkbox"/></td><td>Wrong Stock Pulled</td><td><input type="checkbox"/></td><td>Part Lost/Missing</td><td><input type="checkbox"/></td></tr> <tr><td>Cuffs</td><td><input type="checkbox"/></td><td>Contamination</td><td><input type="checkbox"/></td><td>Out of Sequence</td><td><input type="checkbox"/></td><td>Part Moved</td><td><input type="checkbox"/></td></tr> <tr><td>Crushing</td><td><input type="checkbox"/></td><td>Countersink</td><td><input type="checkbox"/></td><td>Off-set</td><td><input type="checkbox"/></td><td>Drawing</td><td><input type="checkbox"/></td></tr> <tr><td>Heat Treat</td><td><input type="checkbox"/></td><td>Cut Too Short</td><td><input type="checkbox"/></td><td>Mislabeled</td><td><input type="checkbox"/></td><td>Finish</td><td><input type="checkbox"/></td></tr> <tr><td>Wave/Twist in Tube</td><td><input type="checkbox"/></td><td>Instructions Incomplete/Unclear</td><td><input type="checkbox"/></td><td>Fit/Function</td><td><input type="checkbox"/></td><td>Misread</td><td><input type="checkbox"/></td></tr> <tr><td>Marks/Chatter</td><td><input type="checkbox"/></td><td>Drill Holes</td><td><input type="checkbox"/></td><td>Misaligned/off center</td><td><input type="checkbox"/></td><td>Turning Sequence</td><td><input type="checkbox"/></td></tr> </table> |  | Pressure/Forced | <input type="checkbox"/> | Temperature/Cure | <input type="checkbox"/> | Power Loss/Surge | <input type="checkbox"/> | Positioned Wrong | <input type="checkbox"/> | Bending | <input type="checkbox"/> | Set-up | <input type="checkbox"/> | Folio/Program | <input type="checkbox"/> | Outside Dimensions | <input type="checkbox"/> | Centre Not Concentric | <input type="checkbox"/> | BOM/Route | <input type="checkbox"/> | Grain | <input type="checkbox"/> | Over/Under tolerance | <input type="checkbox"/> | Cracks | <input type="checkbox"/> | Broken/Damage/Defect | <input type="checkbox"/> | Weld | <input type="checkbox"/> | Part Incorrect | <input type="checkbox"/> | Crimp/Kink/Ripple/Wave | <input type="checkbox"/> | Inspection Incomplete/Unqualified | <input type="checkbox"/> | Wrong Stock Pulled | <input type="checkbox"/> | Part Lost/Missing | <input type="checkbox"/> | Cuffs | <input type="checkbox"/> | Contamination | <input type="checkbox"/> | Out of Sequence | <input type="checkbox"/> | Part Moved | <input type="checkbox"/> | Crushing | <input type="checkbox"/> | Countersink | <input type="checkbox"/> | Off-set | <input type="checkbox"/> | Drawing | <input type="checkbox"/> | Heat Treat | <input type="checkbox"/> | Cut Too Short | <input type="checkbox"/> | Mislabeled | <input type="checkbox"/> | Finish | <input type="checkbox"/> | Wave/Twist in Tube | <input type="checkbox"/> | Instructions Incomplete/Unclear | <input type="checkbox"/> | Fit/Function | <input type="checkbox"/> | Misread | <input type="checkbox"/> | Marks/Chatter | <input type="checkbox"/> | Drill Holes | <input type="checkbox"/> | Misaligned/off center | <input type="checkbox"/> | Turning Sequence | <input type="checkbox"/> |
| Environment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> | No Re-verification                | <input type="checkbox"/> |                       |                          |                      |                          |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |              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| Design                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | Operator                          | <input type="checkbox"/> |                       |                          |                      |                          |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |                          |                    |                          |                  |                          |                  |                          |         |                          |     |                          |                     |                          |            |                          |                     |                          |                  |                          |                       |                          |               |                          |          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| Doc/Data                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | Offset/Setup                      | <input type="checkbox"/> |                       |                          |                      |                          |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |                          |                    |                          |                  |                          |                  |                          |         |                          |     |                          |                     |                          |            |                          |                     |                          |                  |                          |                       |                          |               |                          |          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| Equip/Tooling                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | Supplier                          | <input type="checkbox"/> |                       |                          |                      |                          |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |              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| Handling/Pre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | Training                          | <input type="checkbox"/> |                       |                          |                      |                          |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |              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| Material                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | Use for Testing                   | <input type="checkbox"/> |                       |                          |                      |                          |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |                          |                    |                          |                  |                          |                  |                          |         |                          |     |                          |                     |                          |            |                          |                     |                          |                  |                          |                       |                          |               |                          |          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| Internal Transport                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Tribal Knowledge                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| LOA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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| Substation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| Past Expiry Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| Misidentified                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| Pressure/Forced                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| Bending                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                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| Centre Not Concentric                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| Cracks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| Crimp/Kink/Ripple/Wave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | Inspection Incomplete/Unqualified | <input type="checkbox"/> | Wrong Stock Pulled    | <input type="checkbox"/> | Part Lost/Missing    | <input type="checkbox"/> |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |              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| Cuffs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| Crushing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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| Heat Treat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| Wave/Twist in Tube                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | Instructions Incomplete/Unclear   | <input type="checkbox"/> | Fit/Function          | <input type="checkbox"/> | Misread              | <input type="checkbox"/> |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |              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| Marks/Chatter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | Drill Holes                       | <input type="checkbox"/> | Misaligned/off center | <input type="checkbox"/> | Turning Sequence     | <input type="checkbox"/> |          |                          |          |                          |              |                          |               |                          |          |                          |              |                          |          |                          |          |                          |                 |              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| OTHER :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                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**Container No: S133713**



**Part: SK145-0114-22**

**Job No: 184624**

**Serial No/Batch: S133713**

**Revision:**

**Inspector:**

**Exp Date:**

**Instructions:**

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